## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or	-Docket I	Number
Application of	21/10	44
100 /	50	id.

CLAIMS AS FILED - PART I						SMALL E	NTITY		OTHE	R THAN		
TOTAL CLAIMS (Column 1)			7'	(Coli	ımn 2)	<b>7</b>	TYPE [		OR	SMALL	ENTITY	
TO IME CENTING		6		<u> </u> :	·	.   -	RATE	FEE	] ,	RATE	FEE	
FOR		NUMBER	NUMBER FILED		. NUMBER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			7. (mi	7. (minus 20= *		6		X\$ 9=		OR	X\$18=	108
<u> </u>			<b>└</b>	ninus 3 = 9			]	X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL	<del>                                     </del>	OR	TOTAL	800	
CLAMAC AC AMENDED DARTH									OTHER	THAN		
<u>U</u>	7 100 1	(Column 1)	<del></del>	(Colun		(Column 3	)	SMALL	ENTITY	OR.	SMALL	ENTITY
ENT A		REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	. 20	Minus	-2	6	. —		X\$ 9=	,	OR	X\$18=	
AME	Independent	NTATION OF MI	Minus	PENIDENT	CLAIM	=	<b>↓</b> . [	X43=		OR	X86=	
THIST THESE VIATION OF MIDELIFLE DEPENDENT CLAIM									+290=			
ın	$\sim 0.1$					<u>ι</u> Δ	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE		
Jd	119	(Column 1)	<u> </u>	(Colum	ın 2)	(Column 3)				•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total · ·	· 36	Minus	<b></b> D.	6		1 [	X\$2\$		OR	x\$18₽	<u>'-'-</u>
	Independent	• 3	Minus	*** /	3		]	x462)	:	OR	x8610	
	PINST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM	<u> </u>	┚┞	+/86		OR	360	
							Ļ	TOTAL		OB L	TOTAL	•
	•	(Column 1)		(Colum	U. 5)	(Column 3)		DDIT FEE <b>l</b>		· / A	ODIT. FEEL	•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA	lΓ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	-		2		X\$ 9=		<u>,</u> ,	X\$18=	
AE [	Independent		Minus	***		=	l ⊩	X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (	CLAIM		╽╟	-1-1-1		OR	<b>∨00</b> ≖	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											